

City of Longview Environmental Health Services Division

P.O. Box 1952 Longview, TX 75606; Walk-in Location: 410 S. High Street (8am-5pm Mon. thru Fri)
Phone 903-237-1285 Fax 903-237-1289
LongviewTexas.gov/FoodService

CITY OF LONGVIEW RESTROOM FACILITY AGREEMENT

All City of Longview mobile food units operating at a location two (2) hours or more must provide this Restroom Facility Agreement form confirming the availability of a restroom for use within 300 feet of the vending location during the hours of operation. A valid Restroom Facility Agreement must be on file for each individual location a vendor operates at for two (2) or more hours. <u>Failure to maintain a valid and accurate</u> <u>Restroom Facility Agreement form may result in permit suspension and/or possible legal charges being filed against the Mobile Food Unit Permit holder.</u>

Vendors utilizing fixed establishment's restroom facilities must have the top portion of this form filled out and signed by the owner/responsible party of the facility intended for use. Note: Residential restroom facilities may not be utilized for this requirement.

Fixed Establishment Restroom Facility Agreement

I,, owner/responsible party for				
Name of Business Owner/Res	ponsible Party (printed)	Name of Business (pr	Name of Business (printed)	
located at	, gives permission to			
Business A	ddress (printed)	Name of Mobile Owner/Responsible Par	ty (printed)	
OfName of Mobile Food		cilities for their employees	during	
acilities during the mobile fo	ration. I understand that observation od unit hours of operation, restroom result in this agreement being rescal Health Division.	n facilities greater than 300		
Signature of Business Owner/Responsible Party	Printed Name of Business Owner/Responsible Party	Contact Phone Number	Date	
ignature of Mobile Food Unit Owner/Responsible Party Printed Name of Mobile Food Unit Owner/Responsible Party			Date	